

PTO/SB/22 (10-07)

Approved for use through 10/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE fuction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) 2091-0307P **FY 2006** (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Filed Application Number 10/743,743-Conf. #9685 December 24, 2003 METHOD, APPARATUS AND PROGRAM FOR IMAGE CLASSIFICATION Art Unit 2622 J. T. Whipkey Examiner This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): **Small Entity Fee** <u>Fee</u> One month (37 CFR 1.17(a)(1)) \$120 \$60 \$230 Two months (37 CFR 1.17(a)(2)) \$460 Three months (37 CFR 1.17(a)(3)) \$1050 \$525 1.050.00 Four months (37 CFR 1.17(a)(4)) \$820 \$1640 Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney-or agent of record. Registration Number ⁄3ኧ CFR 1.34. ation number if agting under 37 CFR 1.34 October 9, 2007 Signature Date Marc S. Weiner (703) 205-8000 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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forms are submitted.

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eduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/743,743-Conf. #9685 **Application Number** TRANSMITTAL Filing Date December 24, 2003 Kazuo SHIOTA First Named Inventor For FY 2008 **Examiner Name** J. T. Whipkey Applicant claims small entity status. See 37 CFR 1.27 2622 Art Unit 2091-0307P TOTAL AMOUNT OF PAYMENT 1,050.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Name: Birch, Stewart, Kolasch & Birch. 02-2448 x Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 510 255 210 105 Design 210 105 100 50 130 65 Plant 210 105 310 155 160 80 310 510 255 Reissue 155 620 310 105 Provisional 210 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims** Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee (\$) 0.00 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) 0 0.00 - 3 = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = (round up to a whole number) x /50 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specific tation We (no small entity discount) Extension for response within third month Other (e.g., late filing sur 1,050.00 SUBMITTED BY Registration No. 40,439 32,181 Telephone (703) 205-8000 Signature (Attorney/Agent) Name (Print/Type) Marc S. Weiner Date October 9, 2007